AME	Docket No. 4670-0110PUS1											
Application No. 10/549,480-Conf. #8164		Filing	Examiner	4070	Art Unit							
		September	15, 2005	K. P. Reddy	į.							
Applicant(s): Mas	sahiro YAMAK	AWA et al.										
Invention: BINDE		ION FOR ELE	CTRODE FO	R ELECTRIC DOUE	BLE LAYE	≅R						
MS Amendment Commissioner for P.O. Box 1450 Alexandria, VA 22: Transmitted here	313-1450 with is an ame			• •								
The fee has beer	n calculated an											
	CLAIMS AS AMENDED Claims Highest											
	Remaining After Amendment	Number Previously Paid	Number Extra Claims Present	Rate								
Total Claims	11	- 20 =	0	x 50.00		0.00						
Independent Claims	2	- 3 =	0	x 200.00		0.00						
Multiple Depend	lent Claims (ch	eck if applicabl	e)									
Other fee (pleas		450.00										
TOTAL ADDIT	IONAL FEE FO	OR THIS AME	NDMENT:			450.00						
x Large Entity				Small Entity								
No additiona	al fee is require	d for this amer	ndment.									
X Please char	ge Deposit Acc			n the amount of \$	450.0	<u> </u>						
•	ne amount of \$		is enclo	sad								
	credit card. For			scu.								
X The Director	is hereby auth	orized to char	ge and credit	Deposit Account No	o. <u>02</u> -	-2448						
<b></b>	d below. A dup ny overpaymer		this sheet is e	enclosed.								
x Charge a	any additional fili	ing∕or applicatio	n processing f	ees required under 3	7 CFR 1.1	6 and 1.17.						
My	n By	For	_		JUN 1							
Marc S. Weiner Attorney Reg. N			,	Dateu.	, , , , , , , , , , , , , , , , , , ,							
BIRCH, STEW/ 8110 Gatehous Suite 100 East P.O. Box 747 Falls Church, V (703) 205-8000	e Road irginia 22040-l		_P									

PTO/SB/17 (06-07)
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Under the Paperwork Red	respond to a collection of information unless it displays a valid OMB control number.											
Effect	Complete if Known											
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).						10/549,480-Conf. #8164						
FEE TR	· · · · · · · · · · · · · · · · · · ·		September 15, 2005									
For		THOU THAIL OF THE CONTROL			Masahiro YAMAKAWA							
	1 1 200			Examiner Name K		K. P. Reddy						
Applicant claims sm	all entity status. S	See 37 CFR 1.2	7	Art Unit		1713						
TOTAL AMOUNT OF PAYMENT (\$) 450.00				Attorney Docket	No.	4670-0110PUS1						
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP												
For the above-ide	ntified deposit a	ccount, the D	irector is	hereby authorize	d to: (che	eck all that apply)						
	s) indicated bel			<del></del>		idicated below, ex	cept for t	ne filing fee				
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17												
FEE CALCULATION	1 3/ UFK 1.10	anu t.17										
1. BASIC FILING, SEAR	CH. AND EXAM	INATION FF	ES									
I. DAGIO I ILING, GLAR	· -	G FEES		ARCH FEES	EXAMI	NATION FEES						
		Small Entity		<b>Small Entity</b>		Small Entity						
Application Type	<u>Fee (\$)</u>	Fee (\$)	Fee (\$		Fee (\$)		Fees I	Paid (\$)				
Utility	300	150	500	250	200	100	***************************************					
Design	200	100	100	50	130	65						
Plant	200	100	300	150	160	80						
Reissue	300	150	500	250	600	300						
Provisional	200	100	0	0	0	0						
2. EXCESS CLAIM FEES	<b>i</b>							<b>Small Entity</b>				
Fee Description	. t' D - '						Fee (\$)	Fee (\$)				
Each claim over 20 (inch		50	25									
Each independent claim		ig Reissues)					200	100				
Multiple dependent clain				m + + /A\		410-1- D1-	360	180				
		ee (\$)		aid (\$) Multiple Dependent Cla								
11 - 20 =		0.00 =		0.00	E	<u>fee (\$)</u> <u>F</u>	ee Paid (	ग				
HP = highest number of total of			<b>-</b>	D - I - I (A)								
		<u>ee (\$)</u> 00.00 =		Paid (\$)								
2 -3 = HP = highest number of indep				0.00								
		ioi, ii greater tric	1113									
3. APPLICATION SIZE F If the specification and		d 100 cheets (	of naner	(evcluding electr	onically i	filed sequence or	computer					
listings under 37 CF	R 1.52(e)), the	application size	ze fee di	ie is \$250 (\$125 f	or small	entity) for each ac	iditional 5	0				
sheets or fraction the						3,						
Total Sheets	Extra Sheets	Number	of each a	additional 50 or frac	tion there	of Fee (\$)	<u>Fee</u>	Paid (\$)				
- 100 =		/50 =		(round up to a who	ole number	) x :	<u></u>					
4. OTHER FEE(S)							<u>Fees</u>	Paid (\$)				
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing surcharge): 1252 Extension for response within second month 450.0												
SUBMITTED BY		1										
Signature	tun 1	LOW	Q	Registration No. (Attorney/Agent)	32,181	Telephone	(703) 20	5-8000				
Name (Print/Type) Marc S. Weiner						Date	Date IIIN 1 8 2007					
						<del></del>	<del>} \                                    </del>	<del>,                                    </del>				